PATENT APPLICATION FEE DETERMINATION RECORD												
CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN												
	1	SMALI TYPE	SMALL ENTITY			OTHER	THAN					
TOTAL CLAIMS			(Column	··/	(COIU	ımn 2)		<u>- L</u>	FEE	OR 1 1		
FOR			MIMORE	FILED	Alluc	BER EXTRA	RAT BASIC			-	RATE BASIC FEE	FEE
<b> </b>		<u> </u>	3/-					385	UR		.770	
┢	TAL CHARGEA	34 minus 26= * •				X\$ 9	}=		OR	X\$18=		
	EPENDENT CL	6 minus 8= -				X43			OR	×86		
L		NDENT CLAIM P					+145	; [		OR	+ 290=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				TOTA	1L		OR	TOTAL	770
CLAIMS AS AMENDED - PART II								-			OTHER	
_		(Column 1)	S. S	(Column 2) (Column 3)						OR	SMALL E	,
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	BER OUSLY	PRESENT EXTRA	RATI	ET	ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
AME	Independent	* NITATION OF 14	Minus	***	CI 4114	=	X43:			OR	X8 <b>&amp;</b>	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+143			OR	+290:	, is
							TOT ADDIT, F			OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colum		(Column 3)	~UU1. I	<b>I</b>		• •		-
ENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	EST BER DUSLY	PRESENT EXTRA	RATI		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
AME	Independent	*	Minus	***		=	X43	1		OR	<b>×86</b> =	
Ľ	FIRST PRESE	+146	_	· ·	OR	+290=						
	•						TO	TAL		OB	TOTAL	
		ADDIT. F			1011	ADDIT. FEE	L					
	100 TO 10	(Column 1)	A STATE OF THE PARTY OF THE PAR	(Colum	EST .	(Column 3)	· •	<del></del>	<del>,,,,,,</del> 1	. 1		ADDI-
AMEND: JENT C		RERAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA	FATE		ADDI- TONAL FEE	-	RATE	TIONAL FEE
207	Tota!	*	Minus	\$.9.		=	X\$ 9	=		OR	X\$18=	
\ME	Independent	*	Minus	***		=	×43	_		OR	X86	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145	_		OR	+2.90	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											TOTAL	-
	of the Highest Nu	mber Previously Pa imber Previously Pa nber Previously Pal	aid For IN TH	IS SPACE IS	s less tha	an 3, enter *3.*	ADDIT. F	FEE L	Yorksta & -		ADDIT. FEE	1 may 2 mg
× 200	THE INGREST NUM	nber Previously Pai						e appro		w ali (X)	mariti le	ه فی این این این این این این این این این ای

Application or Docket Number